



2020 WELLNESS PROGRAM GUIDE

Make yourself a priority.

YOUR WELLNESS PROGRAM OPENS:

July 1, 2020

The City of Nogales wellness program is your chance to take control of both your health and healthcare costs. Get financial rewards for completing a few simple steps, plus get access to free wellness resources on the Bravo portal.



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GOALS AND REWARDS

By participating in City of Nogales' voluntary wellness program, employees enrolled in the medical plan can save **up to \$60/month** on their medical premium and covered spouses can save **up to \$30/month!** (That's extra money in your paychecks!)

Earn the reward by meeting the following goals or improving since your last screening:

Employees and Covered Spouses

☐ **Complete Health Assessment and Health Screening**

Unlocks Incentive for Employees | \$30/Month for Spouses

For your screening to be considered complete, Bravo must receive at least one biometric result (for example: weight, height, or blood pressure) and one result from a blood panel.

Employees Only

☐ **Meet 3 out of 4 of the Following** | \$30/Month

- ☐ **Body Mass Index:** 29.9 or Less
Or Waist: Less Than 34.5 Inches (Female), Less Than 37 Inches (Male)
- ☐ **Blood Pressure:** 128/82 or Less
- ☐ **LDL Cholesterol:** 115 or Less
- ☐ **Glucose:** 105 or Less

☐ **Tobacco/Nicotine Use:** Negative | \$30/Month

MORE DETAILS

What counts as "improving"?

If you don't meet a goal but your biometric levels have improved since last year's screening, you may automatically pass based on your improvement! Improvement goals can be found at the end of this guide.

Not sure if you can meet one or more of the goals? Is completing the program not medically appropriate for you?

You may be able to earn the reward another way. To request an alternative, call Bravo at 877.662.7286. To file an appeal, visit the Bravo portal and download an appeals form. Read more about appeals and alternatives in this guide and call Bravo with any questions.

Looking for other options?

If you choose not to screen and complete the health assessment, there are other ways you can earn the full reward. Contact Bravo at 877.662.7286 by February 26, 2021 to learn more.



STEPS AND DEADLINES

Take it one step at a time. Visit the Bravo portal to complete the steps needed to earn your reward.

1 Create an Account and Register for the Program | By February 26, 2021

Visit the Bravo portal and follow the instructions to create an account (or log in if you already have an account). Then complete the registration step by entering your information. Employees, make sure to answer the tobacco question!

Important: Enter a valid email address during registration and click the verification link that will come in your email. If Bravo doesn't have your correct email address, you won't receive important updates about your results and reward! If you need to update your contact information, visit the My Profile page.

Click Go under Registration on your dashboard.

2 Take the Online Health Assessment | By February 26, 2021

Immediately after completing this interactive health questionnaire, you will receive two reports: a personal report and a physician summary report that you can share with your doctor.

Click Go under Health Assessment on your dashboard.

3 Screen With Your Doctor | March 1, 2020 – February 26, 2021

Schedule an "annual wellness visit" with your healthcare provider, or if you already had a wellness visit on or after March 1, 2020, ask your provider if they will fill out a form with those results. Download a provider screening form from the Bravo portal, complete it with your doctor, and submit it to Bravo by following the instructions on the form. Your provider screening form requires a signature from both you and your provider, as well as a date of exam within the window above.

Click Go under Health Screening on your dashboard.



APPEALS AND ALTERNATIVES

Didn't earn the full reward? You will receive an email letting you know your results are available on the My Plan page of the Bravo portal and are also on their way in the mail. Make sure to review your results as soon as you can. If you didn't earn the full reward, you have two options: request a **reasonable alternative** or file an **appeal**.

Remember that you need to provide Bravo with a valid email address to receive important updates about your results! **Visit the My Profile page to ensure your email is correct.**

How do you complete an alternative?

- **If you don't meet the BMI goal, call Bravo before the appeal deadline listed in your results letter to request an alternative.** You will then have until March 31, 2021 to document 3% weight loss.
- **If you don't meet the blood pressure, LDL cholesterol and/or glucose goal, call Bravo before the appeal deadline listed in your results letter to request an alternative.** You will then have until March 31, 2021 to complete one individual challenge. If completed on time, you'll earn credit for all three goals.
- **If you use tobacco/nicotine and want an alternative way to pass the tobacco goal, you can complete a cessation program to get full credit! Call Bravo to get started.**

Why would you need to file an appeal?

- **Your results were originally not reported, recorded incorrectly, and/or you are providing a new and passing result.**
- **Your doctor thinks it's unreasonably difficult or medically inadvisable for you to meet the employer goal or alternative.**
- **Your doctor would like to set a personalized goal for you to meet by March 31, 2021.**



FILE AN APPEAL:

1. Visit the Appeals page of the Bravo portal to download your appeals form.
2. Visit your doctor and bring the form.
3. File your appeal (via fax, mail or email) by the appeal deadline on your results letter.

Participants must be actively employed and still enrolled in the medical plan to earn credit for meeting an alternative goal.

Alternatives are not intended to identify risk or medical appropriateness. Always consult with your medical doctor before starting any new exercise or nutrition program.



FAQS

Bravo is here for you if you have any questions about the program. If this page doesn't answer your questions, please contact us at 877.662.7286 or email support@bravowell.com. We are here to help Monday through Friday, 8 a.m. – 8 p.m. EST.

Why is my employer setting health goals for me?

City of Nogales is offering this wellness program because sometimes we all need a little extra motivation to prioritize our health. If you're working on improving or maintaining your health, why not get rewarded with lower healthcare costs?

We know that "healthy" isn't one-size-fits-all. Don't worry if the health goals feel out of reach — **alternatives** and **appeals** make it possible to customize the goals to fit your health status.

Does it cost money to participate in the program?

Screening with your doctor is free if it's coded as an annual physical. All resources on the Bravo portal are free for you to use. You will be responsible for any medical expenses tied to the completion of an alternative or appeal.

What if I don't want to participate?

The program is completely voluntary. It is simply an opportunity to take steps to improve your health while earning a reward. The program and its reward are in compliance with the Affordable Care Act (ACA). Employees under age 18 are not eligible to participate.

Will my employer see my health information?

Absolutely not! Bravo takes your privacy very seriously. Your employer will never see your screening results, only averages for the company. When needed to administer your reward, they will only see your total reward/points earned.

How do I know if Bravo received the form I submitted?

Once your form goes through the first stage of processing, you will receive an automated email letting you know that Bravo received it. This can take up to 10 business days, so don't worry if you don't receive an email right away. Once your form is fully processed, you will receive another email letting you know that your account has been updated on the Bravo portal.

When will I receive my reward?

Your reward will be reflected in your paychecks starting July 1, 2021.



IMPROVEMENT GOALS

How much do you need to improve? Reference the charts below to determine your improvement goal(s). You will earn full credit for a goal if you meet your improvement goal either since last year's screening OR in 60 days after requesting an alternative goal.

Examples of Meeting Improvement Goals:

- You lower your LDL cholesterol from 210 (Level V) last year to 204 (Level IV) this year. When you get your results, you see that you've been given credit for the LDL cholesterol goal!
- You lower your blood pressure from 165/100 (Level IV) last year to 157/97 (Level III) this year. When you get your results, you see that you've been given credit for the blood pressure goal!

Body Mass Index Employer Goal: 29.9 or Less

5% weight loss since last screening.

Blood Pressure Employer Goal: 128/82 or Less

| | Systolic | Diastolic |
|-----------|-------------|-------------|
| Level I | 129-138 | 83-87 |
| Level II | 139-147 | 88-92 |
| Level III | 148-157 | 93-97 |
| Level IV | 158-167 | 98-102 |
| Level V | 168 or More | 103 or More |

LDL Cholesterol Employer Goal: 115 or Less

| | |
|-----------|-------------|
| Level I | 116-129 |
| Level II | 130-149 |
| Level III | 150-174 |
| Level IV | 175-204 |
| Level V | 205 or More |

Glucose Employer Goal: 105 or Less

| | |
|-----------|-------------|
| Level I | 106-129 |
| Level II | 130-154 |
| Level III | 155-179 |
| Level IV | 180-204 |
| Level V | 205 or More |

EEOC Privacy Notice

Federal law requires employers that offer wellness programs that collect employee health information to provide a notice to employees informing them what information will be collected, how it will be used, who will receive it, and what will be done to keep it confidential. The notice below fulfills these requirements.

Notice Regarding Wellness Program

City of Nogales has contracted with Bravo Wellness, LLC to administer all or part of its voluntary employee wellness program. The program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act (ADA) of 1990, the Genetic Information Nondiscrimination Act (GINA) of 2008, the Affordable Care Act (ACA) and the Health Insurance Portability and Accountability Act (HIPAA), as applicable, among others. If you choose to participate in the wellness program you may be asked to complete a voluntary health risk assessment or "HRA" that asks a series of questions about your health-related activities and behaviors and whether you have or had certain medical conditions (e.g., cancer, diabetes, or heart disease). You may also be asked to complete a biometric screening or other examinations, which may include a blood test for cholesterol levels (Total, HDL, LDL), triglycerides, serum cotinine (nicotine) and glucose as well as a blood pressure reading(s), height, weight, waist measurements and your pulse. When possible, your blood specimen will be confidentially processed by a laboratory that provides a panel of common preventive wellness measures provided solely for your information.

The information from your HRA and the results from your biometric screening will be used to provide you with information to help you understand your current health and potential risks, and may also be used to offer you services through the wellness program, such as targeted health education, online and telephonic health coaching and health challenges. You also are encouraged to share your results or concerns with your own provider. You are not required to complete the HRA or to participate in the screening or other medical examinations.

However, if you choose to participate in the wellness program you may receive an incentive for participating. More specific details regarding the wellness program, including how incentives are earned can be found in the Program Guide.

As noted in the Program Guide, a portion of the incentives available may be linked to certain health-related activities or to the achievement of certain health outcomes. If you are unable to participate in any of the health-related activities or achieve any of the health outcomes required to earn an incentive, you may be entitled to a reasonable accommodation. You may request a reasonable accommodation or an alternative standard by contacting Bravo Wellness at 877.662.7286. See the Program Guide for more details concerning reasonable alternatives. Additional information will be provided to you in your results summary as well.

Protections from Disclosure of Medical Information

We are required by law to maintain the privacy and security of your protected health information (PHI). Although the wellness program and your employer may use aggregate information collected to design a program based on identified health risks in the workplace, Bravo Wellness and its contracted partners will never disclose any of your personal medical information either publicly or to the employer, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program, as necessary to support health plan or wellness program administration or as permitted by law. In no event will medical information that personally identifies you that is provided in connection with the wellness program be used to make decisions regarding your employment.

Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements.

In addition, all medical information obtained through the wellness program is required to be maintained separate from your personnel records, information stored electronically will be encrypted, and no information you provide as part of the wellness program may be used in making any employment decision. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the wellness program, we will notify you immediately. You can ask to see or get a copy of the health information we have about you. We may charge a reasonable cost-based fee.

You may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be subjected to retaliation if you choose not to participate.

If you are a member of your employer-sponsored health plan, the provisions of the health plan privacy notice may also apply. Please contact your health plan administrator for a copy of the notice. If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, or if you would like a paper copy of this notice or a copy of Bravo's Privacy Statement mailed to you, please contact Bravo Participant Services at 877.662.7286. Bravo's Privacy Statement is also located on the Bravo website at <http://www.bravowell.com/privacy-statement/>.